

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005574

FILED
Apr 19, 2007
Secretary of State

Entity Name: KEY WEST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O LELAND MANAGEMENT
8009 S ORANGE AVE
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

C/O LELAND MANAGEMENT
8009 S ORANGE AVE
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 59-3701631

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LELAND MANAGEMENT
8009 SOUTH ORANGE AVENUE
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: OTTINO, NANCY A
Address: 672 SANDY NECK LANE #204
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP () Delete
Name: BLAKE, PHILLIP E
Address: 259 MINORCA BEACH WAY #703
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: ST () Delete
Name: MORRIS, KRISTINE
Address: 701 SEABROOK COURT # 102
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: NANCY A OTTINI

P

04/19/2007

Electronic Signature of Signing Officer or Director

Date